FORM D



UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 2050 RECEIVED

FORM/Ď

JUL 0 7 2004

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL				
OMB Number:	3235-0076				
Expires: May 31, 200					
Estimated average burden hours per response1					
SEC USE ONLY					
Prefix	Serial				
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DATE RECEIVED

A. BASIC IDENTIFICATION DATA ter the information requested about the issuer of Issuer (check if this is an amendment and name has changed, and indicate change.) Giant Muffler Centers of America, LP tress of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (214) 761-6454 Telephone Number (Including Area Code)		
	Section 4(6) 🔀 ULOE	
A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Big Giant Muffler Centers of America, LP		
Address of Executive Offices (Number and Street, City, State, Zip Code) 901 Main Street, Suite 6300, Dallas, Texas 75202		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) N/A		
Brief Description of Business Operation, and sale of franchise licenses to operate, muffler repair businesses	PROCESSED	
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed other	(please specify): JUL 13 2004;	
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 	issuer;
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Pa	
Full Name (Last name first, if individual)	
BGM Management, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	to the second second
901 Main Street, Suite 6300, Dallas, Texas 75202	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/Managing Pa	
Full Name (Last name first, if individual)	
Randel, Jack L.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
1500 Lincolnshire Road, Oklahoma City, Oklahoma 73159	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/Managing Pa	
Full Name (Last name first, if individual)	
Bare, Jody L.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
901 Main Street, Suite 6300, Dallas, Texas 75202	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/A	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/Managing Pa	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/Managing Pa	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

				В.	INFOR	MATION .	ABOUT OF	FERING		_		
, ,,				11							Yes	No S3
1. Has th	ie issuer sold,	or does the i	ssuer intend t				-					\boxtimes
2. What	is the minimu	m investmen	it that will be				_				\$	25,000
											Yes	No
											×	
remun person than fi	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual? Solve the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. Impore than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Name (Last name first, if individual) ress or Residence Address (Number and Street, City, State, Zip Code) or of Associated Broker or Dealer s in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individuals States). AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [FL] NAMIT [NE] [NY] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [CV] Name (Last name first, if individual) ress or Residence Address (Number and Street, City, State, Zip Code) or of Associated Broker or Dealer s in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individuals Less or Residence Address (Number and Street, City, State, Zip Code) or of Associated Broker or Dealer s in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individuals States). AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [H- LI] [N] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [NV] [NV] [NV] [NV] [NV] [NV] [NV] [N											
Full Name (ual)									
N/A			· ·									
Business or	Residence A	ddress (Num	ber and Stree	t, City, State,	, Zip Code)							
Name of As	sociated Brok	cer or Dealer										
States in Wi	hich Person L	isted Has So	licited or Inte	nds to Solici	t Purchasers							
(Check ".	All States" or	check indivi	duals States)			***************************************					□ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK].	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name fir	st, if individu	ıal)									
Business or	Residence Ac	ddress (Numi	ber and Street	t, City, State,	Zip Code)							
Name of As	sociated Brok	er or Dealer			,,							·
States in Wh	nich Person L	isted Has So	licited or Inte	nds to Solici	t Purchasers							
												1 States
[AL]											[HI]	[ID]
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Full Name (Last name fir	st, if individu	ıal)									
												
Business or	Residence Ac	idress (Numi	per and Street	t, City, State,	Zip Code)							
Name of As	sociated Brok	er or Dealer									<u> </u>	
States in Wh	nich Person L	isted Has Sol	licited or Inte	nds to Solici	t Purchasers							
(Check "	All States" or	check indivi	duals States)			-		· · · · · · · · · · · · · · · · · · ·			☐ Al	l-States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	E OF I	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	,	Aggregate	Amo	ount Already
	Type of Security		fering Price		Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	00
	Common Preferred				
	Convertible Securities (including warrants)	\$	00	\$	0
	Partnership Interests	\$	500,000	\$	50,000
	Other (Specify)	\$	0	\$	0
	Total	\$	500,000	\$	50,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Dol	iggregate lar Amount Purchase
	Accredited investors		2	\$	50,000
	Non-accredited Investors			\$	0
	Total (for filings under Rule 504 only)			\$	50,000
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Tour	D. I	1 A 4
	Type of Offering		Type of Security	Doi	lar Amount Sold
	Rule 505		00	\$	0
	Regulation A		0	\$	0
			ed Partnership		
	Rule 504	Intere		\$	50,000
	Total	Limit Intere	ed Partnership	\$	50,000
				·	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs		\boxtimes	\$	100
	Legal Fees		\boxtimes	\$	30,000
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify) Prospective investor meetings			\$	500
	Total		\boxtimes	\$	30,600

	C. OFFERING I	PRICE, NUMBER O	F INVESTORS, EXPE	NSES AND	USE OF P	ROCEEDS		
	b. Enter the difference between the aggregate total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This o	difference is the "adjuste	ed gross			\$	19,400
5.	Indicate below the amount of the adjusted gro of the purposes shown. If the amount for any to the left of the estimate. The total of the pays set forth in response to Part C - Question 4.b a	purpose is not known nents listed must equal	, furnish an estimate and	d check the bo	ОX			
					Officers,	nents to Directors & Iliates		ments To Others
	Salaries and fees			······	□ \$	0	□ \$_	0
	Purchase of real estate				S	0	□ \$_	0
	Purchase, rental or leasing and installation of	machinery and equipn	nent		S	0	□ \$_	0
	Construction or leasing of plant buildings and	facilities			S	00	□ \$_	00
	Acquisition of other businesses (including the used in exchange for the assets or securities o				□ \$	0	□ \$ _	0
	Repayment of indebtedness	•••••		*********************	□ \$	0	" \$_	00
	Working capital		□ \$	0	⊠ \$_	19,400		
	Other (specify):	•••••	□ \$	0	□ \$	0		
	Column Totals	,			□ \$	0	⊠ \$_	19,400
	Total Payments Listed (column totals ad	ded)			1	S \$1	9,400	
		D. FI	DERAL SIGNATURE	<u> </u>		 		
inde	issuer has duly caused this notice to be signed by tertaking by the issuer to furnish the U.S. Securities edited investor pursuant to paragraph (b)(2) of Rule	s and Exchange Commi e 502.		st of its staff, t	he informat			
	er (Print or Type) Giant Muffler Centers of America, LP	Signature	1 A Har	Da Jul	te y 1, 2004			
Van	ne of Signer (Print or Type)	Title of Signer (Pr			, ,, 200.			
ody	L. Bare	Chief Operating Of	ficer					
		Δ٦	TENTION					

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 pre	esently subject to any of the disqualification provisions of such rule?	Yes	No					
	SZ.	See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (1 239,500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to	furnish to the state administrators, upon written request, information furnished by	the issuer to o	offerees.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	issuer has read this notification and knows the orized person.	contents to be true and has duly caused this notice to be signed on its behalf by the	e undersigned	duly					
-									
	er (Print or Type)	Signature							
	Giant Muffler Centers of America, LP	July 1, 2004							
	ne of Signer (Print or Type)	Title of Signer (Print or Type)							
ody	L. Bare	Chief Operating Officer							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1 2			3		5 Disqualification						
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)	security and ate offering Type of investor and bered in state amount purchased in State			Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL		X				111,00013	Timount	100	1		
AK		X						 	<u> </u>		
AZ		X		 			 · · · · · · · · · · · · · · · · · ·		 		
AR		X							 		
CA	 	Х							 		
СО		X							 		
CT		Х		· 							
DE		X							<u> </u>		
DC		X									
FL		X		 							
GA		X		1							
HI		Х									
ID		Х									
IL		X									
IN		Х									
ΙA		Х									
KS		Х							 		
KY	-	X									
LA		X									
ME		Х									
MD		X			·						
MA		X									
MI		X									
MN		Х									
MS		Х									
МО		Х									
MT		Х									
NE		X									
NV		X									

APPENDIX

1	Intend to sell to non-accredited investors in State Intend to sell to Type of sec aggregate price offere		3	4					5 Disqualificatio		
			Type of security and aggregate offering price offered in state (Part C – Item 1)		under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NH		Х									
NJ		Х									
NM		X									
NY		X									
NC		X									
ОН		X									
OK		Х	Limited Partnership Interests \$500,000	2	\$50,000	0	0		Х		
OR		X									
PA		X	_								
RI		· X									
SC		X									
SD		X									
TN		Х									
TX		X									
UT		X	·								
VT		Х									
VA		Х									
WA		Х									
WI		Х									
WY		X									
PR		Х					··· = 	}			